

## INFANT PROGRAM GUIDE

Infants are children between birth and about eighteen months of age. This is a time of extremely rapid physical and mental growth. In these first two years, babies learn about the world through their senses and through the motor activities of their bodies; they develop close bonds with special adults; and they begin to control more and more aspects of their behavior. Our role as caregivers in the infant center is to facilitate the development of curious children who are challenged by problems, who enjoy doing things for themselves, and who trust in adults.

What do we know about infants and how can we plan the infant environment so that it allows them through their senses and their muscles to develop a friendly acquaintance with and a confident hold on this new world?

### PART 1. WHAT IS AN INFANT?

Infants are natural explorers. By looking, listening, sucking, mouthing, and touching, they gather information about the physical properties of objects and about the events that their actions on objects trigger.

Give babies plenty of objects and experiences which allow them to discover what objects look like, how they feel, and how they sound; and give them opportunities to find out how objects respond when they act on them by pushing, pulling, shaking, and dropping them.

Infants, from the first moment of life, notice similarities and differences in objects, sights, and sounds. Somewhere in their nervous systems, they begin to store this information and to organize it into memory or knowledge banks. As they increase their encounters with objects, they begin to sort them into “what can I do with it” categories, such as objects to be shaken and objects to be sucked. Through active play, the baby’s mind develops as s/he places things in simple relationships.

Provide large, open play spaces stocked with a variety of objects of different sizes, shapes, and textures. Keep toys available at a low height so babies can initiate their own play.

Infants construct their own knowledge. They learn about the world by acting on it, not by absorbing information “taught” them by adults. Give babies uninterrupted time to explore and experiment with objects in the play area and to observe the people around them.

Infants learn by figuring out solutions to their own problems and disputes.

Let babies solve their own problems. Facilitate and support children rather than assume control.

Example 1: You observe a child trying to remove a ball which is stuck in a can. Rather than loosen the ball for the child, trust the infant to solve this problem. Observe and comment, “It’s difficult to get that ball out, isn’t it?”

Example 2: You observe two infants pulling on the same toy and you comment, “Ana, you want the bear, and you, Juan, want the bear too.” Using a calm tone of your voice as you reflect impartially on the dispute supports the children in solving the conflict in their own way.

Infants, from birth onward, are developing language. They listen to and discriminate between different sounds. They begin to recognize and imitate familiar sounds. Although children do not begin to speak words until around twelve months of age, they use their own sounds and symbols before this time to represent objects and events.

Provide from birth onward ample opportunities for infants to hear language. Describe ongoing actions in short, simple sentences, announce what is going to happen (allowing the child to represent or anticipate what will happen next), and respond to the child’s vocalizations.

A baby needs to trust that a particular adult will provide him/her with care, friendship, and guidance. At the infant center, such a relationship resembles and supports but does not supplant the bond of love which evolves between a baby and his/her parents.

Assume primary care, friendship, and guidance for no more than three or four infants. Team with another caregiver who has babies of a similar developmental level to establish a family group and a support system for providing consistent, familiar care to the babies throughout the day and across shifts.

Infants need one-on-one quality time with their caregivers.

Use the care giving activities of diapering, sleeping, eating, and dressing as times for giving the baby your total attention, allowing him/her to feel your presence, to hear your voice, to watch your face, to be held, and to talk with you. By giving your total, unhurried attention each time you care for the infant’s needs, s/he gets “refueled” with human contact and attention and is willing to leave you and play on his/her own.

Infants are assuming more and more control of their own behavior as they mature. To survive, babies need the care which only adults can provide them. Consequently, adults control the lives of babies in many ways, e.g., when they eat and when they are changed. However, too much adult control or constraint deprives infants of valuable opportunities to build new knowledge.

Seek out every possible opportunity for babies to design their own play and to resolve their own disputes. During care giving routines, allow infants to become active participants rather than passive recipients to the extent that we encourage infants to think and act for themselves. This will enhance their possibilities for becoming reasonable, cooperative, and creative persons.

Infants are born with a plan for developing muscular stability and a plan for mobility -

from crawling, to pulling up, to standing, and walking. Facilitate rather than push development. Give babies space and unrestricted opportunities to move through the necessary muscle development and be able to sit and walk. We don't need to "teach" either sitting or walking.

## PART 2. THE INFANT ENVIRONMENT

In designing the infant center, our principle concerns are the security and comfort of both the infants and the adults who share life together at the center. From the infant's perspective, security is important in knowing that the toys available, the furnishings, and the areas s/he has access to may all be explored without danger. For the caregiver who is secure in knowing that the play environment is a secure, inviting place for the baby to explore on his/her own, such a design allows her to spend one-on-one time with each baby during the precious moments of feeding, diapering, or dressing.

### ROOM ARRANGEMENT

The indoor setting of the infant center should allow for activity areas that are clearly marked and distinct from each other:

- 1 areas for eating
- 2 areas for diapering
- 3 areas for sleeping
- 4 areas for playing
- 5 areas for staff
- 6 areas for parents and visitors
- 7 areas for storage

The children are divided into small groups of and are in rooms or divided areas that are of a size appropriate to the size of the group - not crowded, but not too large. North Carolina licensing regulations requires no less than 25 square feet of indoor space for each child. There should be different rooms or divided areas for each developmental stage: a) those that are still immobile, b) those that move by creeping, crawling, or cruising, and c) those that walk, run, and ride wheel toys.

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### ACTIVITY AREAS

The design of each activity area differs for each of the developmental groups - babies who are not yet locomoting, crawlers, and toddlers. The role of the adults as they work with infants in each activity area varies according to the developmental age of the infants as well.

Eating Area for Babies That Are Not Yet Moving About: The room or area used by the

youngest infant whose only feedings come from the bottle, must be equipped with cozy chairs, sofas, or pillows where an adult can comfortably nurse the baby. Since these feedings are special times when the infant receives individual care and attention, the adult seating should be in areas free from noise, traffic, and frequent distractions.

For those mothers who are breastfeeding, the center should encourage the continuation of such feeding while the child is at the center. A mother should be welcomed into the center and provided with a place where she and her infant can be comfortable while nursing. The center can also invite the mother to bring bottled breast milk for the baby to drink while she is away.

With infants that are bottle-fed, the center should assure these infants the same kind of one-on-one attention and physical closeness that the breast-fed babies receive from their mother. Watch the baby, smile at him/her, and talk with him/her. Schedule the routines so that the caregiver can sit and feed an infant while holding him/her without having to jump up and down to take care of the needs of other children. Feeding time should be a quality time for the infant to share with his/her caregiver. For this reason, the same caregiver should, as much as possible, feed the same babies daily.

When feeding an infant who cannot yet feed himself, show him the spoon containing the food. Once the baby indicates acceptance by opening his mouth, put the food in and pay attention to his response to the food. Never force or sneak the spoon into the baby's mouth.

Eating Area for Creepers, Crawlers, and Toddlers: With the child who is beginning to eat pureed foods, the introduction of foods usually comes at about the same time or slightly before s/he begins to sit up on his/her own (about six months of age). The child who has started eating purees but cannot yet sit unassisted is most comfortable being fed while seated in the caregiver's arms. Once a child can come to a sitting position on his/her own, s/he can sit in a chair at a small table. .

For both crawlers and toddlers, the eating areas should contain an appropriate number of small tables which can comfortably seat three to four babies together with their caregiver whose position keeps her within reach of each baby without having to stand up. The tables should be placed on an easily washed floor surface.

High-level storage shelves near the tables should be stocked with bibs, wash cloths, and any other mealtime equipment which needs to be easily accessible for the caregivers in preparing the tables for meals. Before children are invited into the eating area for meals, caregivers should assure that all necessary equipment and foods are arranged on or near the table. A bib and a wash cloth should be placed on or in front of each chair. A serving area near each table should hold dishes, utensils, cups, pitchers of drinks, and serving bowls for each food item. Everything the adult will need during the meal should be available to her within easy reach, including small moistened disposable cloths for quick clean-up of spills.

Since infants may fill up on milk before trying the other foods served, wait to offer milk

until midway through the meal. Giving choices is especially important in feeding. Infants can learn to pay attention to messages coming from their bodies if they can make decisions about what to eat. To the child eating finger foods, offer a choice of a piece of banana or an orange. Respect his choice or his refusal. A child may not eat a balanced diet every day, but over a period of time, s/he will choose for him/herself the foods his/her body needs. Playing games with food, forcing, or coaxing should never be used to get children to eat.

Eating is an excellent opportunity for the infant to gather information about food and to make relationships. Infants can explore how food smells, feels, and tastes as well as the form it came in, the way it changed, and its structure. When serving bananas as a snack, for example, bring the whole banana to the table, allow the children to handle and inspect it, and slowly, with the attention of each child, pull off the peel.

Defining limits clearly is another aspect of care giving that can make the feeding situation easier. Using simple short sentences, tell the child who wants to take his apple and leave the table to eat it while playing that you want him to eat at the table and not in the play area. Be firm and consistent in enforcing such a limit.

For infants who are just beginning to feed themselves, offer finger foods, like chunks of fruit or crackers. Small bits of food which can be easily grasped are a delight for infants who are just refining their pincer grips (using thumb and forefinger). Allow time for such children to play and experiment with the food they are offered.

When children are through eating, allow those who can walk a choice to scrape their own leftovers into a nearby low waste receptacle and to place their dirty dishes in wide, low pans. These clean-up receptacles should be prepared in advance of the meal.

Diapering/Dressing Area: The diapering table or counter should be situated in an alcove or a quiet area of the center, out of the flow of traffic. By creating a somewhat private space for diapering, caregivers can make the most of the one-on-one time that this care giving routine allows them to share with the baby.

The diapering surface should be at a comfortable height in relation to the adults using it so that they aren't required to lift a baby to an awkward height, nor should it force them to bend over while diapering the baby.

Arrange the diapering area so that all diapers and necessary supplies can be reached by the caregiver while keeping one hand on the baby. The care-giver should also find within reach a covered receptacle for dirty diapers.

Dressing provides a great opportunity for infant participation in an activity. When taking off the socks of an infant, pull them half off and ask the child to finish the job. The key is to simplify the task just the right amount so the child gets practice in the steps of the process from the very beginning. Start with undressing first as it is much easier than dressing.

Sleeping Area. Every baby should have a personal crib or mat that is located in the same spot every day. Babies away from home need and deserve such consistency and security for easy sleeping. Try to provide a crib for those babies who are not yet pulling themselves up to a standing position. Once a baby masters pulling himself up, you may feel more comfortable using a sleeping mat placed on the floor. Since cribs take up considerable floor space, your choice in using cribs or mats for the crawlers and cruisers may be determined by the size of your classroom.

The caregiver's main job in this area is deciding when the child needs to sleep. It is especially important for babies in group care to be allowed to rest according to their needs rather than according to a schedule, as is done in preschool. No one napping schedule will fit all the babies. Some infants take short, but more frequent naps; others take no morning nap, but a long one in the afternoon. An individual baby's sleep pattern may also change from day to day.

Babies communicate their needs for rest in different ways. Experienced caregivers learn to read each child's signals, which may range from slowing down and yawning to increased activity and frustration.

The caregiver also learns how to prepare each child for sleep, depending on his needs and customs. Some babies use a small 12 inch blanket; other babies want to be rocked to sleep; some need to be placed in the crib for some time before they can fall asleep, even when tired; and some will habitually play or cry before sleeping. Other children fall asleep immediately. Always follow back to sleep procedures according to North Carolina State Licensing.

### INFANT PLAY SPACES: WHAT TO PROVIDE AND WHAT TO AVOID

The main ingredient of the infant program is play. Since it is through play that babies learn, caregivers should carefully design and maintain the play environment. Remember that each of the developmental groups of babies requires a play area designed to meet the unique interests and skills of babies at that level.

1. Provide simple toys.
2. Provide open—ended toys, i.e., where the child never repeats the same experiences with the toy. What he/she does with the toy is always new.
3. Avoid objects so small that they will fit inside an infant's mouth.
4. Check for durability for group usage.
5. Avoid small wood toys that can be picked up by the child. Such toys can cause harm since they are too easily thrown. Make small wood toys available only during those times when the play is being watched continuously by an adult.
6. Avoid materials which can cause suffocation, such as silk, rayon, and balloons.
7. Don't use free-standing shelves without attaching them to the wall or to the floor.

8. Avoid sharp-cornered furnishings.
9. Avoid railings which have spaces wide enough for a child's head to fit through.
10. Provide choices and challenges. Let the needs and desires of the babies guide their play. A variety of spaces and open-ended toys from which to choose give the babies control over their learning and allows them to match their interests to their play.
11. Make sure that all play materials are visible and accessible to the child so that babies can find toys and create experiences without adult help.
12. Never use walkers, bouncers, small play pens, or infant seats which restrict the child's movement and exploration. A good rule of thumb is: Never put a child in a position or a place s/he is unable to get out of by him/herself.
13. Situate the play area so that adults aren't continually walking through it to get from place to place. A child who is absorbed in play and on the verge of solving a problem can be easily distracted by someone walking by. Create a well-defined traffic area which goes around the infant play space. Area rugs, baskets, and low shelves can be used to give clear definition of boundary between a traffic-way and the infant play space.

Play area for infants not yet moving about. The play space for babies not yet crawling should be large enough so that each baby has ample space to freely kick his legs, strike at objects with his arms and hands and practice rolling over. There should also be sufficient room in this play space to allow one or two caregivers to sit with their babies at play. Unless these youngest babies are cared for in a separate room, this space should be securely divided with a barrier from areas used by more mobile crawlers and toddlers. Try to avoid keeping the alert baby in his crib. This play area gives him much more opportunity to explore than he has available in a restrictive crib. If rocking chairs are used, place them outside of the play space to avoid hitting a baby at play. The play space should have a firm but resilient surface (such as foam pads, or a padded carpet) covered by washable blankets or cloth. Provide mirrors and colorful wall pictures placed only a few inches up from the floor.

The youngest babies --those experiencing or just completing their first month of life-- require very few toys. For them, the sights, sounds, and movements of the environment are stimulating enough. These babies will enjoy looking at the face of the caregiver. Aside from your face, the best toy you can provide this young baby is a starched bright-colored scarf that can be propped eight to nine inches from the baby's eyes.

Once fingers loosen from the fist position, a baby will finger surfaces and move objects back and forth, thereby getting a different view of them as well as a different feel for them. Encourage exploration and curiosity by providing a variety of small objects of different textures, shapes, and sizes, e.g., bright scarves, soft balls, squeeze toys, plastic toys, plastic spoons and keys, and plastic rings. All should be soft, light, and washable toys to be looked at, fingered, and sucked on.

Babies at this stage use the mouth as a primary tool for exploring objects. First, most commonly gumming the fist; then, as weeks pass, gumming and sucking their fingers as well as any other object than can be brought to the mouth. Make sure there is no object in the play area with small parts to come off and be swallowed.

For the older baby in this group, place objects a little bit further than his/her obvious reach —accessible, but so the baby has to work and stretch to reach the toy. Do not put toys into a baby's hand.

Avoid surrounding the baby with so much stimulation (e.g., mobiles, music boxes, toys lined up all around him/her) that s/he begins to avoid and tune out all stimulation. Infants of this age are learning about themselves -their hands, feet, etc. - and about basic properties of simple objects and sights around them. There is no need, therefore, to add to the complexity of the already rich natural environment by overwhelming the child with artificial stimuli.

You can observe the baby's mind developing during this stage by watching for the following:

- 1 When the infant's behavior by chance leads to a new and satisfying result, he immediately tries to rediscover or reinstate this enjoyable experience. When he succeeds, he wants to repeat the behavior over and over.
- 2 The infant creates a new and satisfying activity by coordinating previously separate actions.

Example 1: Objects seen become objects to be sucked. Staring at a fist moving past his eyes, the baby seems to have no control over it or awareness that it is attached to his/her body. Only by accident does s/he get it to the mouth, where s/he sucks on it; once having enjoyed this activity, s/he wants to repeat it. So s/he spends a lot of time watching this wandering hand, gradually learns to slow it down, control it, and direct it to his mouth to suck. Only by practicing the previously separate activities does s/he master them into a smoothly—sequenced new activity.

Example 2: Things heard become things to look at. Babies in this stage begin to turn their heads to look for the source of a noise they hear. They begin to coordinate their vision with their hearing.

Example 3: Starts sucking at the sight of the bottle or breast. The infant coordinates vision with sucking and thereby is learning to anticipate upcoming events.

Play areas for crawlers and cruisers. The play space for crawlers and cruisers needs to be a larger space with more room for them to explore. If possible, provide a variety of floor surfaces -rugs, hard floor, wooden deck, etc. To provide a variety of levels for the child to explore, use pillows and foam mattresses stacked at varying heights as well as low platforms with ramps, slightly graduated stairs, and sides. Rails needed for standing or cruising can be placed along one of the walls or used as boundaries to define the play area.

Again, rocking chairs should be placed outside of the play space to avoid hitting or pinching the roaming crawler. Long, low mirrors can be hung along the walls at the crawler's eye level or placed on a stand in the play space. Since the eyes still serve as a major tool for exploring, tape to the wall and change periodically, brightly-colored



pictures with fine detail.

A wide variety of toys can be provided for infants who are crawling and cruising. Most of their exploration is done with their hands, their eyes, and their mouths. They will use toys to practice looking, mouthing, grasping, and fingering.

Provide toys and objects from two to five inches in size, some of which have fine details to be fingered and looked at. Also provide small containers which a baby can use to put these things into and for pouring them out.

Provide plastic cars and trucks, play or real telephones, rubber rings, shower curtain rings made into chains, plastic blocks, small dolls, balls of different sizes, and nesting toys. Also provide interesting and safe objects from the adult world: pots, pans, plastic spoons, discarded boxes, measuring spoons and cups. Infants appreciate real—life objects as much as they do toys.

Infants of this age will begin to fit objects to each other. Provide lids and containers, stacking boxes, stacking cones, and large Legos. They also enjoy playing with hinged objects (things that open and shut) and with objects that have moving parts. Provide toys with hinged doors and lids that open and close easily; provide books with cardboard pages; provide toys with simple switches and knobs.

What to watch for. You can see the baby's mind grow in its complexity by watching for the following in crawlers and cruisers:

- 1 Focus of exploration begins to shift from practicing newly acquired motor skills on objects to acting on objects and seeing how they react.  
Example 1: Advancing from simply practicing his/her grasp on objects, baby will repeatedly drop things over the edge of a table and watch what happens to these objects.  
Example 2: Rather than kicking simply to practice kicking, baby will kick a hanging toy to watch it swing.
- 2 Baby will repeat these actions which cause objects to respond in new and interesting ways.
- 3 Shows preference for one hand.
- 4 Later, s/he begins to act on objects with the intention of producing a desired effect.  
Example 1: Baby will throw things out of a box in order to empty it.  
Example 2: Baby will push on adult's hand placed near a swinging toy in order to make the toy swing.
- 5 Begins to combine and coordinate familiar but previously separate actions to create new solutions to problems.  
Example: If baby sees a toy and then, before s/he has a chance to grasp the toy, a blanket falls as an obstacle to reaching that toy, s/he will at first, not look for it (out of sight, out of mind). Later, s/he will push aside the blanket in order to get to the toy.
- 6 Begins to use hands independently, transferring an object from one hand to the

other, so he can hold one and reach for a second object.

Play area for toddlers: The play space for those babies who are walking should be larger than the play areas provided the younger infants. They need lots of space both indoors and outdoors to practice their new motor skills. Again, a variety of floor surfaces should be provided, with special attention given to an area where exploration of wet or messy materials can take place.

Place mirrors and tape colorful pictures or photos with fine detail on the walls, at a height level within toddlers' eyes. Low platforms with stairs, support rails, and slides give the toddler opportunities to practice his balance and begin jumping from one level to another. Toddlers enjoy push-and-pull toys, simple wheel toys, large beads to string, large Lego blocks, stacking cones, containers and collections of objects, small figures of people and animals, cardboard books, dolls, dress-up clothes, and dishes promote their language development.

Since toddlers are interested in sensory experiences, provide activities such as water play, sand play, and corn meal play.

Rubber and plastic balls small enough to be grasped but at least two inches in diameter, rubber rings, plastic blocks, small dolls and figures. Shower curtain rings or any commercial interlocking rings are popular with young toddlers whose hands are now free for exploration while standing and walking.

Young toddlers enjoy collections of any toys and objects from two to five inches in size, which they can use for filling and emptying containers (e.g., purses, baskets, cloth bags, plastic tubs and bowls, shiny pots).

Provide interesting and safe household objects to play with, such as plastic spoons and bowls, discarded boxes, sets of measuring spoons and nesting measuring cups.

Toddlers are still interested in fitting objects to each other, so provide lids and matching containers, stacking boxes, spheres, and cups, large Legos, and simple one piece puzzles. Hinged objects are popular --things that open and shut; as are objects with moving parts. Provide toys with hinged doors and lids that open and close easily, books with cardboard pages, and toys with simple switches, dials, knobs, and buttons.

What to watch for. You can see the mind of the toddler grow in sophistication as you observe the following:

- 7 S/he continues to explore how objects respond when s/he acts on them and how they relate to each other in space.
- 8 Begins to stack blocks.
- 9 Is very interested in the results of his actions; varies his actions on objects to create new and different results.  
Example: Baby seated in a chair will drop toys from different positions around him

- and watch to see where and how each object lands on the ground.
- 10 Develops new means to reach a goal. Can use sticks, strings, and other objects to pull toys toward him.
  - 11 Can find hidden objects that he sees an adult hiding.
  - 12 Imitates the actions of adults.
  - 13 May know ten or more words.
  - 14 Enjoys picture books.
  - 15 Can indicate wants with some words and lots of gestures.

### ROLE OF THE ADULT

Nearly everything that happens in the infant center fits into one of two categories --play and care giving (feeding, diapering, dressing, etc.). As with children of all ages, much learning goes on as infants play. But the care giving routines are also valuable times for extending the infant's knowledge.

Your role during care giving routines: The lives of infants evolve around the care giving activities. It is not uncommon for parents to see such activities as chores to be completed as quickly and efficiently as possible. However, if we base our program on the observation that children use their daily experiences to construct knowledge, we need to respect the care giving routines as valuable experiences in working cooperatively, learning speech, using fine muscles to help with the activity, and developing a body image. Our aim is to allow the infant to become an active participant rather than a passive recipient in care giving activities.

The care giving activities also provide precious moments when the caregiver can focus all of her attention on the individual baby. One of our objectives for babies is that they be able to form an intimate, stable, trusting relationship with one caregiver. This type of relationship can best be developed during care giving routines, when the caregiver can offer the baby affectionate words and a warm touch.

But how can a caregiver provide such full, unhurried attention to the baby when, meanwhile, the other infants are off on their own? The answer to this question lies in the carefully prepared play environment as well as in the assignment of caregivers.

If the play environment is designed so that the play requires no adult direction and minimal adult intervention, babies can and should be allowed to play on their own while their caregiver is feeding or diapering one of their peers. If each baby has received total, unhurried attention from the caregiver while being fed or changed, he has been refueled with human contact and is willing to play independently. The baby can go about his play with no more than general supervision from an adult who may be watching a number of babies.

The assistance of other adults provides a second key to comfortably attending to the routine needs of one baby. If children are divided into small groups per area, each area requires two to three caregivers. These caregivers constitute a team that works with all children in their class. There is one basic principle of care which applies to all of the routines. Let the infant anticipate every step of what is about to happen to him. Never pick him up or put him down without telling him of the impending action. This gives him

an opportunity to actively participate in the routine. Say, for example, "I'm going to pick you up now." giving the child time to respond by reaching out, crying, or showing disinterest. Respect the child's response whenever possible. The caregiver should be careful not to offer the infant a choice when the situation does not allow for a choice. For example, only say, "Do you want to be picked up now?" when you are willing to offer the child a real choice. If the care giving activity can wait a few moments while the infant completes his exploration, offering a choice is appropriate. When the situation requires that you attend to the baby and pick him up immediately, no choice is involved, and the caregiver does not ask, but states the intended action. "I'm going to pick you up now. It's time to go." She then picks up the child.

Your role while infants are at play. Your role in the play environment of infants can vary from "hands off" to active involvement. You may be part of the play if the baby invites you to participate with cries, gestures, or words. If you are part of the baby's play, remember not to play for particular results or else the play ceases to be play. If you have not been invited to be part of the play and are either outside the play area observing the play or providing care for another child, interfere as little as possible to ensure that the child can remain absorbed in his/her exploration as long as s/he chooses.

As you observe, talk with, and care for babies, be aware of your role as an educator. Infant education occurs as infants deal with an enormous variety of problems and learn various ways to approach and solve them. The primary function of the adult in infant education is to facilitate learning rather than train or teach. We must reject the simplistic idea that to educate infants is to stimulate them. If babies are simply exposed to objects and people without having a choice to act on them to assess their reaction, much valuable learning is lost. To educate babies is to let them experience the problems they encounter in everyday living, in play, and in being fed and changed.

To facilitate learning, you need to appreciate the problem a baby is working on and allow him/her to solve it his/herself. This does not mean that you always stand idly by or leave to attend to some other chore. As a facilitator, you must look for the optimal level of stress a baby can handle while confronting problems, give the child attention as needed, give feedback, and model desired behavior.

If we see education as providing opportunities for babies to discover, we must learn to value the times when infants play and work on problems on their own. From observing the baby at play, you will learn to intervene selectively. Some basic guides for selective intervention follow.

- 1 1 Intervene when safety is a factor. For example, when one infant leans his head near the cheek of another and takes a small bite, you must intervene. Put an arm around each infant, rub your hand over the aggressor's cheek in the same spot where s/he bit the other child and say, "No. I don't like it when you bite. Touch him gently." Then, turning immediately to the crying child who was bitten, say, "You got bit, didn't you? It hurt!" The calm tone of your voice may be enough to soothe and quiet the crying victim. You state the limit of unacceptable behavior and you model gentleness, the

behavior you wish to teach.

Too often, in such a situation, a caregiver flies onto the scene with more aggression than the children themselves displayed, saying angrily, "Don't bite. I'll teach you to bite!" and yanks the child away to isolate him in a corner. Isolation in a corner has little impact on an infant who usually plays alone and typically spends a lot of time simply watching the events around him anyway. Treating the aggressor harshly only holds up harsh treatment as a model. The aggressor needs to be dealt with firmly, gently, and with no bias. With the victim, you need to acknowledge his/her distress (and possibly pain) without feeling sorry for him/her. Sympathy may reward the victim for being a victim.

- 2 Intervene when the child is frustrated or sad and cries or turns to you for guidance or love. Be careful, however, to avoid solving the frustrated child's conflict for him/her. Observe closely to determine how much guidance the child needs. Sometimes a bit of facilitating allows children to take care of the problem on their own.
- 3 Intervene when the child invites you to play. For example, when a child gives you a toy or extends his/her arms to you, don't interrupt a child's play just because you want to play.
- 4 Intervene when a child needs changing, feeding, or sleep. Remember to tell the child what you are about to do before you pick the child up or guide him to another area for care.